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ABSTRACT

Offered for teachers who are overwhelmed by the task of selecting specific details from referral information for application with the learning disabled child is an analysis of prescriptive teaching for early childhood. Prescriptive teaching is described in terms of utilizing diagnostic information by modifying the educational program and indicating what is educationally relevant to the child's disability and learning modality. Discussed are: (1) the rationale for use of the technique; (2) structuring, which is based on the diagnostic formula and behavior patterning of the child; and (3) the reporting of diagnostic findings, involving only findings that have educational relevance. The teacher who uses prescriptive teaching is described to be a diagnostician who needs to be sensitive to the learning process for detecting factors of attention span, pace of learning, and style of learning. The technique is recommended as a system of teaching which brings about improvement in the therapeutic area and, with time, improves performance of the learner. (MC)

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PRESCRIPTIVE TEACHING - A DIAGNOSTIC APPROACH FOR EARLY CHILDHOOD

by

Robert G. Fontenot

In a world increasingly concerned with education as a preparation for living in a complex civilization, the teacher finds himself overwhelmed by the task of selecting from the mass of information now available about the atypical child and applying that information in a learning environment. This abundance of information is the direct result of referrals by the school to diagnostic agencies and therapeutic resources.

However, since the information received from these sources is often not relevant to the problem of teaching the child in the classroom, the teacher becomes easily discouraged. Both the diagnostician and the teacher become frustrated when the former sees his diagnosis and resultant recommendations ignored and the latter sees no relevance to the educational environment. The teacher's task is further complicated by the lack of authoritative agreement on what is an atypical child.

Prescriptive teaching can relieve the teacher of the burden of deciding what constitutes an "atypical child" and can assist in the great task of facilitating the learning process. It can provide a systematic approach to learning through a variety of diagnostic therapeutic resources and by utilizing all information from these sources that have educational relevance.

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DEFINITION:

Just what is prescriptive teaching? The word "prescribe" literally means to write beforehand and prescriptive means to set down the direction. Therefore, prescriptive teaching is a method of utilizing diagnostic information for children with learning disabilities through the modification of the education program, and helping teachers to differentiate teaching methods that are more amenable to the remediation of each child's learning disabilities. Prescriptive teaching can accomplish this by indicating what is educationally relevant to the child's disability and his learning modality. Then the teacher can formulate teaching procedures that will yield possible and desirable changes in the child's academic progress, emotional condition, and social adjustment (Peters, 1965).

THE RATIONALE:

Indeed, if education is based upon sound learning principles it must in all fairness to the learner prescribe teaching. This systematology of prescriptive teaching must seek to translate interdisciplinary diagnostic findings into terms that are educationally relevant in terms of the consequences handicapping the child's learning.

Thus, the level of the learner and that which is to be learned, through a modified school environment variable, may be equated. Prescriptive teaching can provide a methodology for dealing with a wide range of problems in the regular classroom or in the special class (Peters, 1965), . . . a methodology designed to accomplish therapeutic aims by educational means. Hopefully, diagnostic findings are

made meaningful in educational terms, and those terms communicate substance to the educator responsible for the educational environment in the school setting. Thus, the gap is bridged from the area of diagnosis to the area of implementation, an application which must take place in the classroom. Communication becomes the medium and words the tools for understanding in the field of prescriptive teaching. A language common to all disciplines involved in the diagnosis of the child's learning approaches is necessitated if successful actualization of prescriptive teaching is to take place.

Every educational prescription for remediation of learning and personality is dependent upon the modification of stimuli in the school environment. Therefore, organization of the mass of information related to the teaching-learning activity depends upon the principle of structure which forms the basis of prescriptive teaching.

STRUCTURING:

The principle of structure (Nall, 1965) is based on the diagnostic formula and behavior patterning (learning) of the youngster. It does not mean that the student does the same thing in exactly the same manner and at exactly the same time. This calls for the removal of irrelevant stimuli and choice while attempting the learning of the task at hand. Indeed, such removal assures attention and largely eliminates distractibility. Further, the principle of structure is suggested as an approach to effective learning for all children. . . not just those children with learning disability. Indeed, for more productive learning in and out of school, structure should extend into all areas and facets of a child's life. Thus, the principle of

structure should hold regardless of diagnostic reports, findings, and recommendations.

REPORTING DIAGNOSTIC FINDINGS:

What types of diagnostic recommendations should be made? Obviously, only those that have educational relevance should be formulated. Because the school must be the laboratory in which diagnosis and therapeutic means are implemented by the teacher and must be the place where modification of the environment - academic, emotional, and social - can transpire. Diagnostic recommendations must be educationally prescriptive if these recommendations are to be sound.

Educational prescriptions which elicit profound explanations of why a child has a problem at school have, at best, a limited value for the teacher. And again, one that suggests the home environment as a possible cause is illuminating but has little value in deciding how best to teach the child. Such explanations do have value, but they do not define the situational connection of the handicap nor do they answer what could best happen to the child at school. Diagnostic techniques then, can be worthwhile if they only improve the choice of class placement for the child.

Recommendations that suggest psychotherapy for the child away from the school ignore the considerable potential of the school as a therapeutic center. One must not forget that children's learning (Kephart, 1960), as it involves academic skills, attitudes, and knowledge, centers within the school. Although many other disciplines are concerned with the solution of problems that contribute to learning disabilities, the learning problem itself and the applied aspects of treatment must be predominately the concern of the school. In short

the school is the center of the child's universe; therefore, he must see the relationship of therapy in the educational center where his formal learning takes place, and where he spends the larger portion of his time. . . to his universe peripheral to the school.

The type and place of the therapy are both significant, but the place must be an important ingredient in the treatment. Educational therapy in itself (Ashlock, 1966) (Stephen, 1966) is not a cure for the learning problem but is rather a preparation for and reinforcement of improved performance in the process of learning and living. This preparation must take place within the halls where learning takes place. . the school.

The performance of a child in a therapeutic clinic does not hold significance for him as great as his performance in the school. Therefore, the logical place for therapy is the school, not in a clinic apart from the school. And prescriptive teaching is the methodology by which the performance of a child in his school can be enhanced.

THE TEACHER AS A DIAGNOSTICIAN:

Prescriptive teaching as a methodology demands that the teacher becomes a diagnostician also. As a diagnostician he must be sensitive to the learning process and how and why children learn. To the diagnostic teacher, attention span, interest, pace of learning, and style of learning are significant and must be ascertained in order to determine the learning media. The teacher must diagnose each of these learning factors for each child in her class before

she can practice prescriptive teaching.

The length of attention span that a child can tolerate is directly related to the amount of mastery of the task. The teacher must somehow determine a child's ability to attend and then assign each task to each child accordingly. As a diagnostic teacher, such determinations are an essential part of prescriptive teaching if successful learning is to become a habit for the student.

The pace of learning represents another important area of diagnosis for the teacher. How long does it take John to read and comprehend syntaxically in various subjects, materials, and activities? Does he learn at an equal rate in all subjects, one subject, or how quickly can he manipulate this task and learn this type of activity? These are questions which demand an answer, and surely have relevance so far as the classroom and learning are concerned.

Next, the teacher must detect each student's style of learning. How does this child learn? Can he grasp an idea and learn better by visual perception, or does he seem to perform more successfully by auditory modality? Perhaps a particular child can do his best learning by the tactile approach, or must he feel his learning through a Kinesthetic modality? It is quite possible that a youngster may utilize only one of these learning modalities or a combination of them. At any rate, it becomes imperative to diagnose the learning mechanism or system of learning possessed by each child; for after all, learning is the raison d'etre for his being in the school.

Prescriptive teaching demands that the teacher draw from his experiences and observation of each child and somehow bring together from the findings of other diagnostic agencies and therapeutic centers whatever has educational relevance into his prescriptive system of teaching. Only then will the information from interdisciplinary resources have substance and meaning in the educational setting.

SUMMARY:

Prescriptive teaching, then, would incorporate some of the elements of learning discussed as having positive contributions. Use of these elements could produce disappointing results. As stated previously, prescriptive teaching seeks to incorporate the findings of various disciplines and formulate recommendations which have educational relevance and which can be implemented in the school environment. This means, of course, that the teacher must also become a diagnostician to identify the learner's interest, pace, and style of learning. Such identification would enhance and facilitate the learning process.

Prescriptive teaching, then, is recommended as a system of teaching which brings about improvement in the therapeutic area and which in time improves the performance of the learner. It brings into clearer perspective the equation of the teacher and the taught. The success of the prescriptive teaching system must depend on necessity upon the quality of diagnoses and the ability to translate these diagnostic findings into educational patterns that have relevance for the school environment and which can be implemented within the school.

Prescriptive teaching is a promising approach to the successful application of all available information from every source about every pupil and having educational significance for facilitating the learning process. This system of teaching is not to be considered as a "package" anointed with the holy oils of wisdom or as a panacea for all the ills of teaching and learning; rather prescriptive teaching embodies a set of ideas that can make learning pleasurable and profitable for both teacher and learner.

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